

Fee waived (vfr)

**NOTICE OF APPEAL**  
**UNITED STATES DISTRICT COURT**

FILED  
U.S. DISTRICT COURT

SOUTHERN District of NEW YORK 2016 SEP 16 AM 2:57

UNITED STATES OF AMERICA

- v -

**BRIAN RUBEL**

Docket Number

S.D. OF N.Y.W.P.  
**09 CR. 898 (CS)**

**HONORABLE CATHY SEIBEL**

(District Court Judge)

Notice is hereby given that **the defendant BRIAN RUBEL**  
appeals to the United States Court of Appeals for the Second Circuit from the:

judgment ☒; order ☐; other ☐: \_\_\_\_\_  
(specify)

entered in this action on 09/14/16  
(date)

Offense occurred after November 1, 1987 Yes ☒ No ☐

The appeal concerns: conviction only ☐; sentence only ☒; conviction and sentence ☐.

Date: **September 16, 2016**

TO: Benjamin Allee, Esq.  
Assistant United States Attorney  
300 Quarropas Street  
White Plains, New York 10601

Barry Leiwant, Esq.

(Counsel for Appellant)

Address: Federal Defenders of New York, Inc.

52 Duane Street - 10<sup>th</sup> Flor

New York NY 10007

Telephone Number (212) 417-8700

ADD ADDITIONAL PAGE IF NECESSARY

(TO BE COMPLETED BY ATTORNEY)	TRANSCRIPT INFORMATION - FORM B
<b>QUESTIONNAIRE</b>	<b>TRANSCRIPT ORDER</b> <small>DESCRIPTION OF PROCEEDINGS FOR WHICH TRANSCRIPT IS REQUIRED (INCLUDE DATE).</small>
<input checked="" type="checkbox"/> I am ordering a transcript <input type="checkbox"/> I am not ordering a transcript Reason: <input type="checkbox"/> Daily copy is available <input type="checkbox"/> U.S. Attorney has placed order <input type="checkbox"/> Other Attach explanation	Prepare transcript of _____ Dates _____ <input type="checkbox"/> Pre-trial proceedings <input type="checkbox"/> Trial <input checked="" type="checkbox"/> Sentence <u>9/14/16</u> <input type="checkbox"/> Post-trial proceedings

The ATTORNEY certifies that he/she will make satisfactory arrangements with the court reporter for payment of the cost of the transcript.  
(FRAP 10(b)) Method of payment ☐ Funds ☐ CJA Form 24

ATTORNEY'S signature <u>Susanne Brody</u>	Susanne Brody, Esq.	DATE <b>9/16/16</b>
<b>COURT REPORTER ACKNOWLEDGMENT</b> <small>To be completed by Court Reporter and forward to Court of Appeals.</small>		
Date order received	Estimated completion date	Estimated number of pages

Date \_\_\_\_\_

Signature \_\_\_\_\_  
(Court Reporter)